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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 6/29/2012 8:17 AM Fee Receipt: \$40.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

Articles of Organization Limited Liability Company KLC

Pursuant to KRS 14A and KRS 275, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the limited liability company is

HARBOUR PLACE, LLC

Article II: The street address of the limited liability company's initial registered office in Kentucky is

401 W. MAIN ST., SUITE 1100	LOUISVILLE	KY	40202
Street Address Only (No Post Office Box Numbers)	City	State	Zip Code
and the name of the initial registered agent at that office	is Gregory S. Condra		
Article III: The mailing address of the limited liability cor	npanv's initial principal office is		

PO BOX 701321	LOUISVILLE	KY	40270-1321
Street Address or Post Office Box Number	City	State	Zip Code

Article IV: The limited liability company is to be managed by (must check one):

A. a manager(s). B. its member(s).

Article V: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective

date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is _

(Delayed effective date and/or time)

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Not JAC	Nathan T. Shaw, member	6/12/12		
Signature of Organizer	Printed Name & Title	Date		
and the second second	Natalie W. Shaw, member	4/37/12		
Signature of Organizer	Printed Name & Title	Date		
Gregory S. Condra	, consent to serve as the registered agent on behal	, consent to serve as the registered agent on behalf of the limited liability company.		
(SCn +5	Gregory S. Condra	2/27/12		
Signature of Registered Agent	Printed Name	Date		

(01/12)